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04-06-01

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PTO/SB/05 (4-98)

Approved for use through 09/30/2006 OMB 2001-0203

Patent and Trademark Office U.S. DEPARTMENT OF COMMERCE

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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> (Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))		Attorney Docket No. OMNI0006
		First Inventor or Application Identifier Patel et al.
		Title Client Installation and Execution System for Streamed...
		Express Mail Label No. EL816159057US

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09/827030  
04/05/01

<b>APPLICATION ELEMENTS</b> See MPEP chapter 600 concerning utility patent application contents.		<b>ADDRESS TO:</b> Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
<p>1. <input checked="" type="checkbox"/> <b>Fee Transmittal Form</b> (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)</p> <p>2. <input checked="" type="checkbox"/> <b>Specification</b> [Total Pages <b>111</b>] (preferred arrangement set forth below)            - Descriptive title of the Invention            - Cross References to Related Applications            - Statement Regarding Fed sponsored R &amp; D            - Reference to Microfiche Appendix            - Background of the Invention            - Brief Summary of the Invention            - Brief Description of the Drawings (if filed)            - Detailed Description            - Claim(s)            - Abstract of the Disclosure</p> <p>3. <input checked="" type="checkbox"/> <b>Drawing(s)</b> (35 U.S.C. 113) [Total Sheets <b>47</b>]</p> <p>4. <b>Oath or Declaration</b> [Total Pages <b>3</b>]            a. <input checked="" type="checkbox"/> Newly executed (original or copy)            b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d))            (for continuation/divisional with Box 16 completed)            i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b>            Signed statement attached deleting            inventor(s) named in the prior application,            see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).</p>		
<p>5. <input type="checkbox"/> <b>Microfiche Computer Program (Appendix)</b></p> <p>6. <b>Nucleotide and/or Amino Acid Sequence Submission</b> (if applicable, all necessary)            a. <input type="checkbox"/> Computer Readable Copy            b. <input type="checkbox"/> Paper Copy (identical to computer copy)            c. <input type="checkbox"/> Statement verifying identity of above copies</p>		
<b>ACCOMPANYING APPLICATION PARTS</b>		
<p>7. <input checked="" type="checkbox"/> <b>Assignment Papers</b> (cover sheet &amp; document(s)) ✓</p> <p>8. <input checked="" type="checkbox"/> 37 C.F.R. § 3.73(b) Statement            (where there is an assignee) <input checked="" type="checkbox"/> <b>Power of Attorney</b></p> <p>9. <input type="checkbox"/> <b>English Translation Document</b> (if applicable)</p> <p>10. <input type="checkbox"/> <b>Information Disclosure Statement (IDS) PTO-1449</b> <input type="checkbox"/> <b>Copies of IDS Citations</b></p> <p>11. <input type="checkbox"/> <b>Preliminary Amendment</b></p> <p>12. <input checked="" type="checkbox"/> <b>Return Receipt Postcard (MPEP 503)</b>            (Should be specifically itemized)</p> <p>13. <input checked="" type="checkbox"/> <b>Small Entity Statement</b> <input type="checkbox"/> <b>Statement filed in prior application.</b>            (37 C.F.R. 1.12) <input type="checkbox"/> <b>Status still proper and desired</b>            Certified Copy of Priority Document(s)            (if foreign priority is claimed)</p> <p>14. <input type="checkbox"/> Other: _____</p> <p>15. <input type="checkbox"/> Other: _____</p>		

\*NOTE FOR ITEMS 1 & 15: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEE, A SMALL ENTITY STATEMENT MUST BE FILED IN BOX 12, EXCEPT IF CMA FILED IN A PRIOR APPLICATION IS REILED UPON (37 C.F.R. § 1.63(b)).

16. If a **CONTINUING APPLICATION**, check appropriate box, and supply the requisite information below and in a preliminary amendment:  
 Continuation    Divisional    Continuation-in-part (CIP)   of prior application No. / \_\_\_\_\_

Prior application information: Examiner \_\_\_\_\_

Group / Art Unit \_\_\_\_\_

For **CONTINUATION or DIVISIONAL APPS** only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

<input checked="" type="checkbox"/> Customer Number or Bar Code Label		22862	or	<input type="checkbox"/> Correspondence address below
(Insert Customer No. or Attach bar code label here)				
Name				
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Name (First/Last)	Michael A. Glenn	Registration No. (Attorney/Agent)	30,176
Signature	4/5/01		

**Bar Code Filer Statement:** This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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# FEE TRANSMITTAL

## for FY 1999

Patent fees are subject to annual increase.  
Small Entity payments must be supported by a small entity statement,  
otherwise large entity fees must be paid. See Forms PTO/SB/09-12  
See 37 C.F.R. §§ 1.27 and 1.28

TOTAL AMOUNT OF PAYMENT (\$ 809.00)

## Complete if Known

Application Number	Unassigned
Filing Date	Herewith
First Named Inventor	Patel et al.
Examiner Name	Unassigned
Group / Art Unit	Unassigned
Attorney Docket No.	OMNI0006

## METHOD OF PAYMENT (check one)

1.  The Commissioner is hereby authorized to charge indicated fees and credit any over payments to

Deposit Account Number **07-1445**Deposit Account Name **Michael A. Glenn** Charge Any Additional Fee Required  
Under 37 CFR §§ 1.16 and 1.172.  Payment Enclosed: Check  Money  Order  Other

## FEE CALCULATION

## 1. BASIC FILING FEE

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
101 760	201 380	Utility filing fee	<b>355.00</b>
105 310	206 155	Design filing fee	
107 490	207 240	Plant filing fee	
108 760	208 380	Reissue filing fee	
114 150	214 75	Provisional filing fee	
<b>SUBTOTAL (1)</b>		<b>(\$ 355.00)</b>	

## 2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from table	Fee Paid
66	20*	<b>46</b>	<b>414.00</b>
Independent	3**	<b>3</b>	<b>0.00</b>
Claims			
Multiple Dependent			

\*or number previously paid, if greater. For Reissues, see below

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
103 18	203 9	Claims in excess of 20	
102 78	202 39	Independent claims in excess of 3	
104 260	204 130	Multiple dependent claim, if not paid	
109 78	209 39	** Reissue independent claims over original patent	
110 18	210 9	** Reissue claims in excess of 20 and over original patent	
<b>SUBTOTAL (2)</b>		<b>(\$ 414.00)</b>	

\* Reduced by Basic Filing Fee Paid

**SUBTOTAL (3) (\$ 40.00)**

Complete if applicable

Name (Print/Type) <b>Michael A. Glenn</b>	Registration No. (Attorney/Agent) <b>30,176</b>	Telephone <b>650-474-8400</b>
Signature 		Date <b>4/5/01</b>

Burden Hour Statement. This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete the form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231